

Important Information
Regarding
Reinstatement Application for Professional Engineers

At its meeting on November 13, 2007, the State Board of Registration for Professional Engineers and Land Surveyors adopted a new policy regarding the license reinstatement of Professional Engineers and Land Surveyors.

Board Policy 07-02 is as follows:

All applicants seeking reinstatement of their registration following the license being administratively revoked for having an expired license for greater than 4 years shall be required to pass as a minimum the principles and practices examination, unless the applicant has continued their license in force from another acceptable jurisdiction without interruption and in compliance with current Continuing Education requirements for a licensed Georgia registrant during the time when the Georgia licensure was not active.

License Reinstatement Applicants should be aware that this application will be reviewed by the Board and if the applicant is determined to be eligible for reinstatement, one of the following options will be recommended:

- If the applicant has maintained licensure in another jurisdiction without interruption, and otherwise meets continuing education requirements, there will be a \$1000 reinstatement fee assessed upon approval.
- If the applicant has **not** maintained licensure in another jurisdiction without interruption, and otherwise meets continuing education requirements, it will be necessary for the applicant to pass the Principles & Practices exam, for which the applicant will be given 4 offerings beginning with the next available offering. No additional Board fee will be assessed; however, the applicant will have to remit payment for the scheduling of the exam(s) to the exam administrator.

GEORGIA STATE BOARD OF PROFESSIONAL ENGINEERS & LAND SURVEYORS

Post Office Box 13446 • Macon, Georgia 31208 • (478) 207-2440

www.sos.state.ga.us/plb/pels/

REINSTATEMENT APPLICATION FOR CERTIFICATE AS A PROFESSIONAL ENGINEER

Application Fee \$100 (non-refundable)

License Type: PROFESSIONAL ENGINEER

Additional License Types (currently or previously issued by the Georgia Professional Licensing Boards):

Method Obtained by:

Applicant is applying for above referenced license by: **Reinstatement** of License # _____

Name as desired on License: _____
First Middle Last

Names as shown on exam records or transcripts (if different):

First Middle Last

Social Security Number: _____ **Date of Birth:** _____

Physical Address: _____
Number and Street Apt. No. City/State Zip
P.O. Box not acceptable

Mailing Address: _____
(if different) Number and Street Apt. No. City/State Zip

Telephone Number Day Telephone Number Evening E-Mail Address

Affiliation:

Name of firm _____

Physical Address: _____
Number and Street Apt. No. City/State Zip
P.O. Box not acceptable

Mailing Address: _____
(if different) Number and Street Apt. No. City/State Zip

NOTE TO APPLICANT: This information will be entered into the Division database for Accounting and Licensing purposes. All items must be completed, and then duplicated on the next page of the application for Board review.

APPLICATION FOR REINSTATEMENT AS A PROFESSIONAL ENGINEER

(License that has expired for more than 4 years. If your license expired less than 4 years ago, you may renew online.)

Section 1: General Information

Date: ____/____/____

Name: _____
First Middle Maiden Last

Social Security Number*: ____-____-____ Birthplace: _____ Date of Birth: ____/____/____

*THIS INFORMATION IS AUTHORIZED TO BE OBTAINED & DISCLOSED TO STATE & FEDERAL AGENCIES
PURSUANT TO O.C.G.A. § 19-11-1 & O.C.G.A. § 20-3-295, 42 U.S.C.A. § 551 & 20 U.S.C.A. § 101.

Mailing Address: _____
Street and Number City State and Zip

Permanent Address: _____
Street and Number City State and Zip

Business Phone: (____) _____ Home Phone: (____) _____

Are you a US Citizen? [☐] Yes [☐] No If no, submit registration card.

What year were you initially granted a Professional Engineer license in the State of Georgia? _____

Designate the one branch of engineering in which you propose to practice in Georgia: _____

Designate all the special branches of engineering in which you have been examined (civil, structural, mechanical, electrical, etc): _____

Have you practiced engineering on a project within the State of Georgia where a license was required, but you did so without a current license? [☐] Yes [☐] No If yes, include complete details on additional sheet.

Present Position (your title): _____

Company Name: _____ Company Address: _____

Have you ever been convicted or pled nolo contendere to a crime? [☐] Yes [☐] No If yes, include complete details on additional sheet.

Section 2: Registration

Lapsed Georgia Professional Engineer License number: _____

Expiration Date of your most recently lapsed Georgia License: _____

Has a professional license from any jurisdiction been revoked, suspended or sanctioned? [☐] Yes [☐] No

Name all the jurisdictions (states or territories) where you have been granted a Professional Engineer license:

Name all the jurisdictions where you have maintained an uninterrupted Professional Engineer license(s) (Provide verification of license in **current** state of residence.):

Name all jurisdictions where you no longer maintain a current professional license for whatever reason:

SECTION 3: EXPERIENCE
* EXPERIENCE SINCE YOUR GEORGIA LICENSE WAS REVOKED *

SHADED AREAS ARE FOR BOARD USE ONLY

| | | | |
|-------------------------|------------------------|------------------|----------|
| School: _____ | Degree/Date _____ | ABET: Yes _____ | No _____ |
| Masters: _____ | Degree/Date _____ | ABET: Yes _____ | No _____ |
| Technology: _____ | Degree/Date _____ | ABET: Yes _____ | No _____ |
| Other: _____ | Degree/Date _____ | ABET: Yes _____ | No _____ |
| EIT State & Date: _____ | PE State & Date: _____ | Discipline _____ | |

| Eng. # | Company/ Employer Name | Your Title | From: <u>Mo/Yr</u> | To: <u>Mo/Yr</u> | Total Months |
|---|------------------------|------------|-----------------------|---------------------|-----------------|
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| | | | | | |
| Total # of Endorsement Forms: _____ (All Engagements MUST be endorsed.) | | | | | |
| NOTES: | | | | | |

SECTION 4: CONTINUING EDUCATION ¹

[illegible]

Notes

¹ See Board Rules, Chapter 180-11.

² Attach proof of completion of all coursework listed.

³ PDHs must have been earned in the last four (4) years with 15 or more earned within the last two (2) years.

SECTION 6: ENDORSEMENT FORM**Section 6A – To Be Completed By Applicant**Applicant Name: _____
Last First Middle Maiden

Engagement No. as listed in Section 3: _____

This endorsement is for: Reference & Experience Verification ☐ Reference Only ☐ Employment Verification Only ☐**Georgia Law Section 43-15-15(d) states: "An application shall contain the names of not less than five persons, not related to the applicant by blood or marriage, of whom at least three shall be registered, active professional engineers...having personal knowledge of the experience on which the applicant predicates his qualifications."**Experience described on this form was obtained while employed by: _____
Company Name

Address City State Zip Code County

For this engagement please provide name of direct supervisor: _____

Was your direct supervisor a registered PE? ☐ Yes ☐ No Other: _____

Endorser for this Engagement: _____

State your Title(s) & Name of Company. Describe experience (one line is not sufficient) detailing in first person the work you personally performed in design, study, review, testing or other tasks which required your engineering skills. This work should be progressive in difficulty and magnitude; demonstrate sufficient breadth and scope, not a narrow technical skill focus; and reflect the acquired ability to design and apply engineering principles to demonstrate that your judgment may be trusted on projects involving public health and safety. Do not attach resume or project lists. Experience must be verified by PE associates even if you are self-employed.

| Dates | | Engagement No. |
|---|-------------|----------------|
| From Mo/Yr | To Mo/Yr | |
| | | |
| Type of Experience | | % |
| Engineering Design | | |
| Engineering Studies, Reports, Evaluations | | |
| Engineering Research, Data Preparation & Interpretation | | |
| Other Engineering Related Activities | | |
| Non-Engineering (including surveying) | | |

If you need additional space, please attach additional sheets.

Section 6B – To Be Completed by Endorser
Applicant's description in Section 6A above is:☐ Accurate ☐ Inaccurate (Explain if inaccurate): _____Were you the applicant's direct supervisor for this engagement? ☐ Yes ☐ NoIf direct supervisor were you a registered engineer: ☐ Yes ☐ No State Registered/No.: _____

Discipline: _____ Date of Issue: _____

Signed: _____

Name of Applicant: _____

1a. How well do you know the applicant: ☐ very well ☐ well ☐ slightly ☐ not at all

1b. List dates (months and years) of contact with the applicant: _____ to _____
Mo. & Yr. Mo. & Yr.

1c. Basis of contact: ☐ As the applicant's PE supervisor ☐ As an associate or co-worker in Engineering Work
☐ Other (explain) _____ ☐ Are you related by blood or marriage? ☐ Yes ☐ No

2. Do you have personal knowledge of the applicant's engineering work? ☐ Yes ☐ No If yes, complete entire form.
If no, complete only items 3 & 10.

3. What is your opinion of the applicant's personal integrity and reputation: _____

4. Would you employ applicant in a position of trust: ☐ Yes ☐ No If no, explain: _____

[illegible]

6. Licensure in Georgia is not by classification of any discipline of Engineering practice. However, the Board is interested in the applicant's background and experience and appreciates your appraisal in selecting the discipline in which the applicant is most proficient.

- ☐ Civil Breadth with Depth in:
 ☐ Environmental
 ☐ Geotechnical
 ☐ Structural
 ☐ Transportation
 ☐ Water Resources
☐ Structural I
 ☐ Electrical
 ☐ Environmental
 ☐ Mechanical
 ☐ Other _____

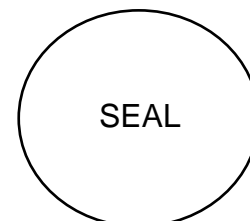
☐ Qualified ☐ Additional Experience Needed ☐ Unqualified

9. Based on the definition of the practice of engineering, Georgia Law 43-15-2(11), do you recommend the applicant for PE licensure? ☐ Yes ☐ No

Print Name: _____

FIRST MI LAST

If licensed, please verify with professional engineer seal with signature.



SECTION 5: AFFIDAVIT BY APPLICANT

State of: _____

County of: _____

Applicant Name: _____
Last First Middle Maiden

Applicant's name

being first duly sworn, deposes and says:

I, the applicant named in this application, have read the contents hereof, and to the best of my knowledge and belief the statements contained in this application are true in substance and effect and are made in good faith. I further state that I have read and pledge to adhere to the Board's rules of professional conduct upon obtaining my registration in Georgia.

Applicant's Signature

Subscribed and sworn to before me this _____ day of _____, 20____

Signature of Notary Public (SEAL)

My commission expires: ____/____/____